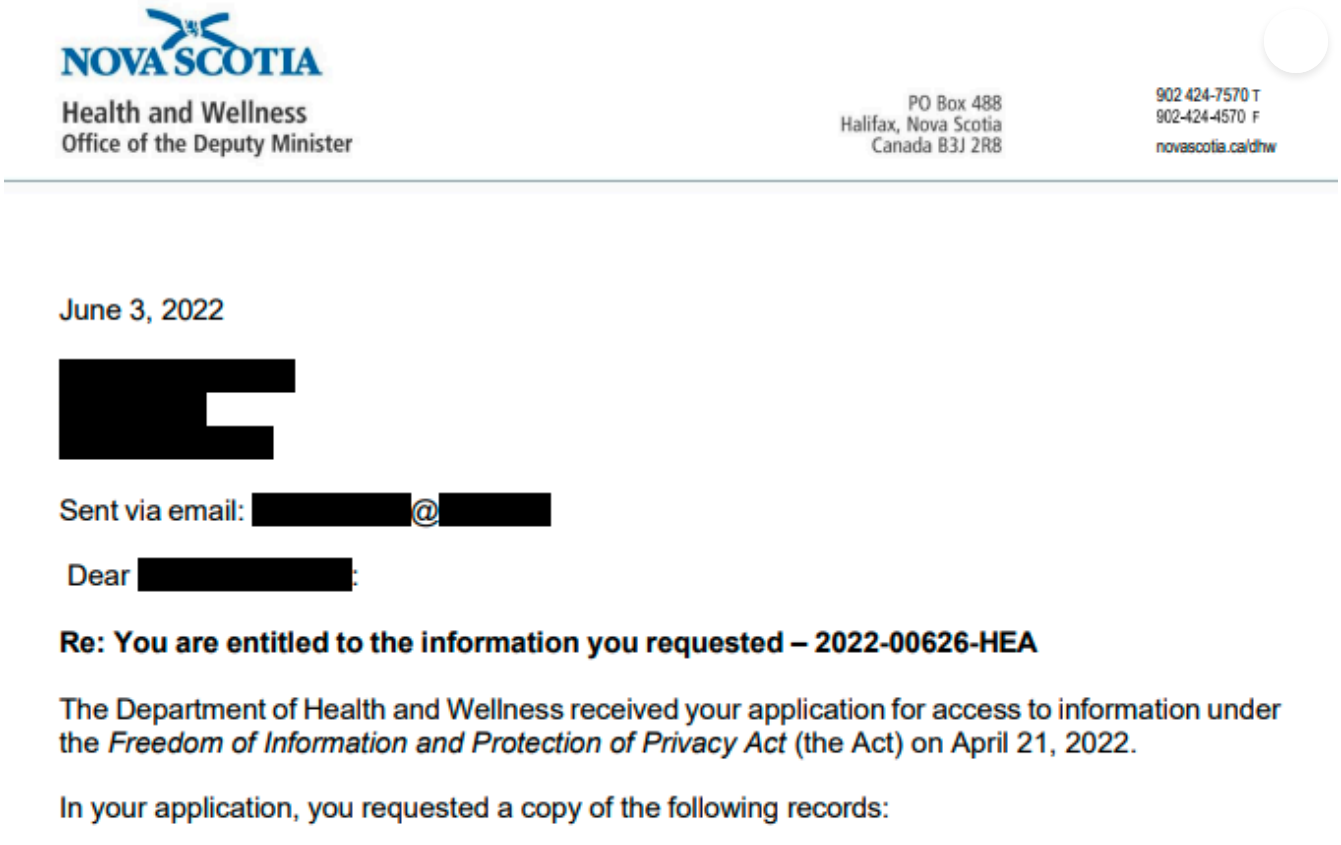
CANUCK LAW
Reporting That You're Not Getting Elsewhere (Do Your Own Research To Verify)

AUGUST 28, 2022 BY RONNIE

Nova Scotia FOI: Another Data Dump On Cases/Vaxx Rates



NOVA SCOTIA
Health and Wellness
Office of the Deputy Minister

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June 3, 2022

[redacted]

Sent via email: [redacted]@[redacted]

Dear [redacted]:

Re: You are entitled to the information you requested – 2022-00626-HEA

The Department of Health and Wellness received your application for access to information under the *Freedom of Information and Protection of Privacy Act* (the Act) on April 21, 2022.

In your application, you requested a copy of the following records:

More information is coming out of Nova Scotia, thanks to a few dedicated researchers. First, we will get into the correlation between vaxx status and cases, hospitalizations, ICU admissions, and deaths. The data is actually pretty interesting, and can be presented with little comment.

Of course, there is no virus, but that's another issue.

COVID CASES BY IMMUNIZATION STATUS

MONTH REPORTED	PUREBLOODS	1 DOSE <14 DAYS	1 DOSE >14 DAYS	2+ DOSES
January 2022	341	43	149	2,649
February 2022	281	18	154	1,475
March 2022	244	3	106	1,363
April 2022	338	1	110	1,231

HOSPITALIZATIONS BY IMMUNIZATION STATUS

MONTH REPORTED	PUREBLOODS	1 DOSE <14 DAYS	1 DOSE >14 DAYS	2+ DOSES
August 2021	1	0	0	0
September 2021	16	2	10	5
October 2021	3	1	6	8
November 2021	13	1	7	9
December 2021	5	0	2	34
January 2022	32	5	10	110
February 2022	36	1	5	58
March 2022	23	0	2	16
April 2022	30	0	4	28

ICU ADMISSIONS BY IMMUNIZATION STATUS

MONTH REPORTED	PUREBLOODS	1 DOSE <14 DAYS	1 DOSE >14 DAYS	2+ DOSES
August 2021	0	0	0	0
September 2021	2	0	2	2
October 2021	2	1	1	0
November 2021	3	1	4	5
December 2021	2	0	1	5
January 2022	6	4	1	21
February 2022	9	0	2	12
March 2022	7	0	1	2
April 2022	6	0	1	9

DEATHS BY IMMUNIZATION STATUS

MONTH REPORTED	PUREBLOODS	1 DOSE <14 DAYS	1 DOSE >14 DAYS	2+ DOSES
August 2021	0	0	0	0
September 2021	2	0	0	3
October 2021	2	0	0	1
November 2021	2	0	1	7
December 2021	1	0	1	7
January 2022	15	0	1	51
February 2022	17	2	4	21
March 2022	9	0	2	18
April 2022	17	0	1	17

ADVERSE REACTIONS

MONTH REPORTED	SERIOUS	NON-SERIOUS	TOTAL
August 2021	57	5	62
September 2021	23	6	29
October 2021	39	8	47
November 2021	28	11	39
December 2021	26	5	31
January 2022	27	3	30
February 2022	24	27	51
March 2022	36	8	44
April 2022	65	14	79

And how many people typically die in a year in Nova Scotia? Keep in mind, it's around 1,000,000 people, so several thousands should be expected annually. Keep in mind, this encompasses all causes of death.

TOTAL DEATHS

MONTH	Y2019	Y2020	Y2021	Y2022
January	920	888	862	873
February	804	821	812	230*
March	936	888	850	–
April	807	865	759	–
May	783	847	874	–
June	774	716	790	–
July	767	805	776	
August	791	757	816	–

September	701	802	837	–
October	807	813	881	–
November	818	883	907	–
December	864	879	908	–
Total	9,772	9,964	10,072	1,103*

Here's another document, almost 60 pages, that is worth a quick look. There's too much to properly address everything in this one article. Also, yet one more is available. Now, for some disclaimers that everyone should be familiar with:

1. PURPOSE OF THE DOCUMENT

This document describes certification and classification (coding) of deaths related to COVID-19. The primary goal is to identify all deaths due to COVID-19.

A simplified section specifically addresses the persons that fill in the medical certificate of cause of death. It should be distributed to certifiers separate from the coding instructions.

2. DEFINITION FOR DEATHS DUE TO COVID-19

A death due to COVID-19 is defined for surveillance purposes as a death resulting from a clinically compatible illness, in a probable or confirmed COVID-19 case, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery from COVID-19 between illness and death.

A death due to COVID-19 may not be attributed to another disease (e.g. cancer) and should be counted independently of preexisting conditions that are suspected of triggering a severe course of COVID-19.

3. GUIDELINES FOR CERTIFYING COVID-19 AS A CAUSE OF DEATH

In view of COVID-19 it is important to record and report deaths due to COVID-19 in a uniform way.

> A death due to COVID-19 is defined for surveillance purposes as a ***death resulting from a clinically compatible illness, in a probable or confirmed COVID-19 case***, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery from COVID-19 between illness and death.

This has been covered before, but is worth a going over. The definition of a "Covid death" is nothing short of fraud. The original has been moved or deleted, but the archive is still

available.

As a reminder, the WHO said in its March 2020 guidance (page 3), and September 2020 guidance (page 8) that virus isolation is not recommended for routine diagnostic procedures.

> Confirmed case
> .
> A person with confirmation of infection with SARS-CoV-2 documented by:
> .
> • The detection of at least ***1 specific gene target*** by a validated laboratory-based nucleic acid amplification test (NAAT) assay (e.g., real-time PCR or nucleic acid sequendng) performed at a community, hospital, or reference laboratory (the National Microbiology Laboratory or a provincial public health laboratory)
> or
> • The detection of ***at least 1 specific gene target*** by a validated point-of-care {POC) NAAT that has been deemed acceptable to provide a final result (i.e., does not require confirmatory testing)
> or
> • ***Seroconversion or diagnostic*** rise (at least 4-fold or greater from baseline) in viral specific antibody titre in serum or plasma using a validated laboratory-based serological assay for SARS-CoV-2

In fact, given the testing "requirements" provided, it doesn't appear that any proof of a virus is required in any stage.

And if you haven't seen Christine Massey's work with Fluoride Free Peel, go do that. There are some 200 or so FOIs showing that no one, anywhere in the world, has ever isolated this "virus". It's never been proven to exist. There's no point having a discussion on what treatments are beneficial, until the existence of this is demonstrated. Other interesting reads are apocalypticyoga, by Bill Huston, Stormhaven, by William Ray, and What's Up Canada by Wayne Peters.

(1) 2022-00626-HEA Response Package
(2) 2022-00445-HEA Response Package Test Results Nova Scotia Redacted
(3) Decision – 2022-00455-Long Redacted

OTHER IMPORTANT LINKS

(1) https://www.who.int/classifications/icd/Guidelines_Cause_of_Death_COVID-19.pdf (Original)

(2) https://canucklaw.ca/wp-content/uploads/2021/01/WHO-Guidelines-Classification-Of-Death.pdf

(3) https://canucklaw.ca/wp-content/uploads/2021/01/WHO-COVID-19-laboratory-Testing-March-17-2020.pdf

(4) https://canucklaw.ca/wp-content/uploads/2021/01/WHO-2019-nCoV-laboratory-September-11-2020-Guidelines.pdf

PREVIOUS FOI RESULTS FROM NOVA SCOTIA

(A) https://canucklaw.ca/nova-scotia-foi-response-tacitly-admits-there-is-no-wave-of-hospitalizations/

(B) https://canucklaw.ca/nova-scotia-foi-result-province-refuses-to-turn-over-data-studies-justifying-masks-in-schools/

(C) https://canucklaw.ca/more-foi-requests-from-nova-scotia-trying-to-get-answers-on-this-pandemic/

(D) https://canucklaw.ca/nova-scotia-foi-request-shows-province-reduced-icu-capacity-in-recent-years/

(E) https://canucklaw.ca/nova-scotia-foi-shows-province-has-no-evidence-asymptomatic-spreading-even-exists/

(F) https://canucklaw.ca/nova-scotia-foi-province-refuses-to-turn-over-contract/

(G) https://canucklaw.ca/nova-scotia-foi-19-1-million-spent-on/

(H) https://canucklaw.ca/nova-scotia-foi-no-real-increase-in-deaths-due-to-pandemic/

(I) https://canucklaw.ca/nova-scotia-foi-more-deaths-as-vaccination-numbers-climb/

(J) https://canucklaw.ca/nova-scotia-foi-govt-data-on-deaths-by-age-vaxx-status/

CANADA, FOI REQUEST, GLOBALISM, HEALTH, VACCINES